

## **MEDICAL CONTROL WITHIN EMS/TRAUMA SYSTEMS DEVELOPMENT**

An essential component of system networking is the presence of strong medical direction (off - line / indirect / prospective / retrospective) and available medical control (on-line / direct / immediate) for prehospital EMS services throughout an entire regional trauma system.

Following are medical control issues that need to be addressed at each level of system development. It is intended that all persons at each level involved in quality management activities have access to trauma registry data.

### **LOCAL LEVEL:**

Plan for prospective and retrospective (indirect/off-line) medical control (an absolute for individual advanced EMS services)

Service medical directors should have a formal agreement for their personnel to be covered by on-line medical control consistent with the regional trauma system plan

Approve local protocols and standing orders

Service medical directors or physician designees should serve on regional medical control board

Each designated trauma facility should have a physician serve on the regional medical control board (populated TSAs may wish to establish a representative group)

Each EMS service should have a quality management plan directed by a physician

### **REGIONAL LEVEL:**

Medical Control Board established to plan for appropriate medical control

Develop regional treatment protocols, standing orders, and triage criteria

Generate by-pass protocols

Plan for educational programs for physicians, nurses and prehospital personnel such as:

Inservice programming

ACLS

ATLS

TNCC

PHTLS

Emergency dispatch course

Vehicle operation course

PALS, APLS

Develop quality management program

Generate a communications plan consistent with the needs of medical control in the region

Medical Control Board reviews local plans for medical control

**STATE LEVEL:**

Trauma Technical Advisory Committee (TTAC) develops generic triage criteria and suggests guidelines for By-pass protocols

TTAC reviews regional trauma system plans for inclusion of medical control and communication considerations from medical control perspective

TTAC assists in planning for CE programs for medical control physicians

TTAC reviews quality management as it relates to medical control

Prehospital treatment protocols and standing orders will be developed as guidelines for regional and local medical directors.

Communications Plan developed consistent with needs of medical control throughout state

